

## ISSUE SI.I.P STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RH		4/30
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	FR	1018	04/15/01
RESPONSE FORMALITY REVIEW	MO	JERR	04/30/01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
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If more than 150 claims or 10 actions  
staple additional sheet here

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Q-2  
X-617  
4-31-01

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